NORTH CAROLINA EMERGENCY DEPARTMENT (ED) VISITS FOR OPIOID OVERDOSE: MARCH 2018

600

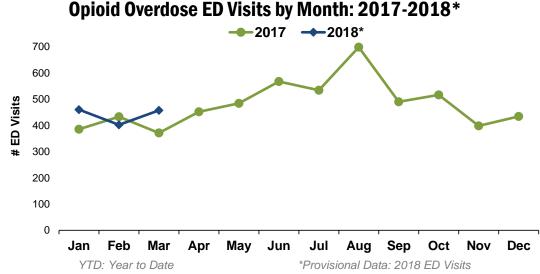
457 Opioid overdose ED visits March 2018

Compared to 371 March 2017

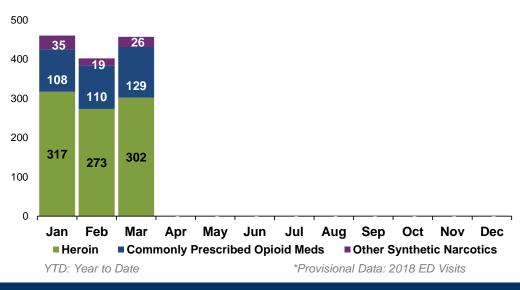
Source: NC DETECT: ED; Syndrome: Overdose: Opioid Overdose (ICD-9/10-CM)

Note: Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. Opioid overdose cases include poisonings with opium, heroin, opioids, methadone, and other synthetic narcotics.

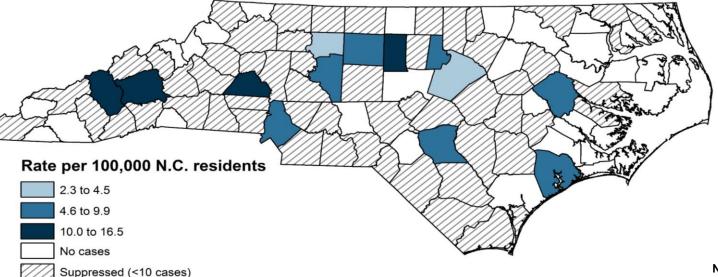
Opioid Overdose ED Visits by Year: 6,000 2010-2018* ■ YTD (Mar) ■ Full year 5.000 4,000 # ED Visits **ED Visits** 3,000 3,986 2.000 1.000 1,319 1.189 957 874 866 814 764 774 673 0 2011 2012 2013 2014 2015 2016 2017 2018* YTD: Year to Date *Provisional Data: 2018 ED Visits



Monthly ED Visits by Opioid Class: 2018* YTD



Rate of Opioid Overdose ED Visits by County: March 2018*



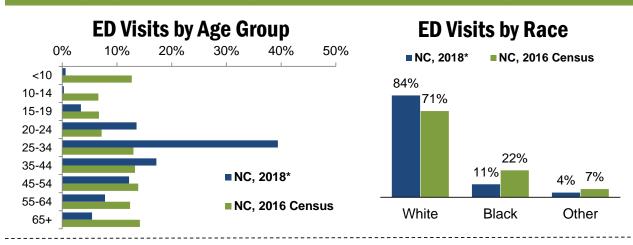
Highest Rates of Opioid Overdose ED Visits by County: March 2018*

County	Count	Rate
Haywood	10	16.5
Buncombe•	33	12.9
Catawba•	18	11.5
Alamance•	17	10.6
Cumberland•	29	8.9
Onslow	14	7.5
Davidson	12	7.3
Pitt	10	5.6
Durham•	16	5.2
Guilford	25	4.8

Note: Rate per 100,000 N.C. residents; Rates not shown for counties <10 cases;

• ≥5 overdoses this month compared to last month.

Demographics of 2018 Opioid Overdose ED Visits Compared to the 2016 NC Standard Population Census



Demographic data from the North Carolina census provide population-level context for potential disparities by age or race among opioid overdose ED visits.

In North Carolina, ED visits for opioid overdose occur predominately among whites, and those ages 25-34 years.

Source: U.S. Census Bureau. *Quick Facts Data: North Carolina* 2016. Retrieved August 22, 2017, from http://quickfacts.census.gov.



NOTE: The North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) is North Carolina's statewide syndromic surveillance system. For training on NCDETECT, contact Amy Ising, ising@ad.unc.edu.

*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes. NC DETECT reports five